[Company headed paper]

[Date]

DP Department

The Nautical Institute

202 Lambeth Road

LONDON

SE1 7LQ

United Kingdom

**Application for BALLAST CONTROL OPERATOR CERTIFICATE**

We hereby certify that [FULL NAME] (DOB: [DATE OF BIRTH]) is employed by [COMPANY NAME] as a [RANK] on board our vessels.

We have checked his/her sea time against our records and verify that the entries below meet with the minimum requirements of the BCO Scheme.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **VESSEL NAME** | **GRT** | **IMO No.** | **DP CLASS** | **FROM** | **TO** |  | **Sea Service Days** | **RANK** |
|  |  |  |  | DD/MM/YY | DD/MM/YY |  |  |  |
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This letter is provided in support of his/her application for the Ballast Control Operator Certificate.

Yours faithfully

[Signatory’s Name]

[Signatory’s Job Title]

[Contact Details]

[Company Stamp]